



## Demonstration Projects for State and Local Health Departments: Routinely Recommended HIV Testing as Part of Regular Medical Care Services



### Overview

This demonstration project addresses Strategy One of the Advancing HIV Prevention Initiative: making HIV testing a routine part of medical care. It is designed to evaluate the feasibility and sustainability of offering HIV testing to eligible clients as a routine part of non-HIV-related medical care in clinical settings. Although the routine offering of HIV testing is the ultimate goal, some project areas will offer alternative strategies (e.g., offering testing to a randomly chosen subset of the patient population) because of operational issues, such as staffing or physical plant limitations or other concerns. Persons who test positive will be linked into HIV treatment and care while at the testing site, local community health centers, or other settings. The demonstration project will examine the feasibility and success of using the recently approved OraQuick<sup>®</sup> rapid HIV test in these settings by tracking barriers to implementation, acceptance rates, and costs.

The four health departments funded under this demonstration project have each identified three clinical sites at which HIV testing will be offered. These 12 sites include an emergency room, a dental clinic, and an inpatient unit, as well as acute care clinics. All sites have met the requirement of being high HIV prevalence settings. To varying degrees, each site will follow the same basic process for offering HIV rapid testing as a routine part of medical care:

- Approach the client and ask if he or she would like to take a free HIV test.
- Go to a private room to explain the test and administer the rapid HIV test.
- Collect demographic and risk information.
- If result is negative: inform client.
- If result is preliminary positive: inform client, and offer confirmatory testing.
- For preliminary positives: introduce client to the HIV or infectious disease staff to have blood drawn for the confirmatory test.

Each site will test between 1,500 and 6,000 persons per year (depending on the site), and the sites will facilitate access to care for at least 80% of those who test positive. Recruitment periods will correspond to peak client flow through the various clinics. These data will be compared with historical HIV testing patterns at each of the project sites.

## Goals

The overarching goals of this project are to;

- demonstrate the feasibility of conducting routine HIV rapid testing within medical facilities;
- increase access to voluntary HIV rapid testing in medical settings; and
- demonstrate effective linkages of persons diagnosed with HIV within medical settings to medical evaluation, treatment, prevention, and other appropriate services.

## Collaborator Projects

**Wisconsin:** The Division of Public Health HIV/AIDS Program is funding three clinics (Health Care for the Homeless, 16<sup>th</sup> Street Community Health Center medical clinic, and 16<sup>th</sup> Street Community Health Center behavioral clinic) in Milwaukee to perform rapid tests as part of this project. All three of the clinics will offer the tests to everyone who meets the basic eligibility requirements. Rapid HIV testing (OraQuick<sup>®</sup>) will be offered to all eligible persons.

**Massachusetts:** The Department of Public Health HIV/AIDS Bureau is funding three clinics—two in Boston (Boston Medical Center Adult Primary Care Unit and Boston Medical Center Menino Pavilion) and one in Lowell (Lowell Community Health Center). Menino Pavilion is the only inpatient unit in the demonstration project. At the Adult Primary Care Unit and Lowell Community Health Center, designated providers will offer all of their patients the opportunity to be tested. Testing will be offered to patients at the Menino Pavilion site as time and staffing allow. Rapid HIV testing (OraQuick<sup>®</sup>) will be offered to all selected patients.

**Los Angeles:** The County Department of Health Services Office of AIDS Program and Policy is funding three sites within the city (LA Free Clinic, Clínica Monseñor Oscar Romero, and LA County USC Hospital). Because of the size of the sites or manpower constraints, Los Angeles project sites will not offer testing to everyone, but instead will randomly select patients (e.g., every third person to sign in will be offered testing). Rapid HIV testing (OraQuick<sup>®</sup>) will be offered to all selected patients.

**New York State:** All of these sites are located in the Bronx, including the only emergency room and dental clinic involved in this project. All New York sites (Bronx-Lebanon Hospital Center's Dental Clinic, Open Access Clinic, and Emergency Department) are able to offer HIV tests to all eligible patients who come into the clinic, as time and staffing allows. Funding is through the New York State Department of Health AIDS Institute. Rapid HIV testing (OraQuick<sup>®</sup>) will be offered to all eligible patients. In addition, patients at the dental clinic may choose oral HIV testing (OraSure<sup>®</sup>).

## Project Milestones

- Funding announcement: April 2003
- Selection of contractors: July 2003

- Investigator meetings: November 2003; possible second meeting in Fall 2004
- Rapid test implementation: April 2004 for most sites
- Site visits: November 2003 – February 2004 for implementation of site visits; other site visits will be planned as needed

## Data Collection

All sites will collect data on the acceptance rate (i.e., how many of the people who were offered testing agreed to be tested), as well as on clients' demographics, risk behaviors, and testing histories. Sites will report data on CD4 and viral load blood tests; the administration of these tests indicates that the patient has received positive confirmatory test results and entered into care.

Clinical sites will also solicit feedback from the persons who receive the tests, such as whether they considered the setting appropriate for HIV testing and counseling. If clients have previously received a traditional HIV test, they will also be asked to compare receiving a preliminary positive from a rapid test (with a week or more wait for a confirmatory test result) to the traditional HIV testing method, which takes a week or more for the initial result.

## Results to Date

All sites have initiated testing. Although limited quantitative data have been generated, invaluable information regarding operational issues and how best to develop and implement similar programs has been generated through meetings, one-on-one discussions with sites, and site visits. This type of information is particularly useful because one of the goals of these demonstration projects is to develop guidelines of best practices for use by other health departments and clinical settings interested in implementing similar projects.